

ORIGINAL OR AMENDED

STATEMENT OF ORGANIZATION FORM FOR CANDIDATE COMMITTEES

1 Committee ID #: 1	10. REPORTING WAIVER REQUEST: If the committee does
1. Committee ID #: /50533	not expect to receive or expend in excess of \$1,000 in an election
2. Type of Filing:	and checks this box, the filing requirement of pre, post and annual
Original	campaign statements is waived. The Reporting Waiver will be
	automatically lost if the committee exceeds the \$1,000 threshold.
Amendment to Items:Eff. Date:	11. Name and Address of Depositories or Intended Depositories
3. Full Name of Committee (must include Candidate's first	of committee funds. (Michigan Bank, Credit Union or Savings & Loan
and last name): Commission To Fleet Doug	Association)
Semmer Semmer	a. Official Depository
4a. Candidate Full Name (Last, First, M.I.):	CHEMICAL BANK STERMING STERMIN
Dougles A. Sommer	CHEMICAL BANK
4b. Political Party (if applicable):	314 EMIDLANDET
4b. Folitical Falty (ii applicable).	
4a County of Booldonson	BAY CITY, MI 48706 N
4c. County of Residence:	b. Secondary Depository
4d. Office Sought (Check one):	b. occorridary bopository
Governor Lt. Governor State Senator	Ę
State Rep. Sec. of State Attorney Gen.	}
State Bd. of Ed. UofM Reg. MSU Trustee	12. This item applies only to Gubernatorial Candidate
WSU Gov. Supreme Court Appeals Court	Committees: Check if this committee intends to seek qualifying
	contributions or make qualifying expenditures.
Circuit Court District Court Probate Court	,
Municipal Court Local or other please specific 7th Ward Commissioner	13. ELECTRONIC FILING: This item applies to committees that file
Local or other please specify:	with the Michigan Department of State Bureau of Elections only and
4e. District/Circuit # or Jurisdiction:	does not apply to candidates that file with the County Clerk's office.
	The Compaign Finance Act requires any committee that files
5. Date Committee was Formed: 5-18-09	The Campaign Finance Act requires any committee that files with the Secretary of State and spends or receives \$20,000 in the
6a. Committee Phone #: 489 \$ 274 -8453	preceding calendar year OR expects to receive or spend \$20,000
<u></u>	in the current calendar year to file campaign statements
6b. Committee Fax #: 866 - 556 - 6427	electronically. Merts Plus software is provided to you free of
	charge to assist you in meeting this requirement.
6c. Committee E-mail Address:	Committee amount on received or expressed to enough or receive in
7a. Complete Comm. Mailing Address (May be PO Box):	Committee spent or received or expects to spend or receive in excess of \$20,000 and is required to file electronically.
7a. Complete Comm. Mailing Address (May be PO Box):	·
414 S. Henry St.	** OR **
414 S. Henry St. Bay City MI 48706	Committee did not spend or receive or does not expect to spend
pag City	or receive in excess of \$20,000 and would like to file electronically
	voluntarily.
7b. Complete Comm. Street Address (May not be PO Box):	1.4. Marifications 1/1/10 portify that all recognition diligence was used
414 S. Henry St.	14. Verification: I/We certify that all reasonable diligence was used in the preparation of the above statement and that the contents are
2 1 MT 40706	true, accurate and complete to the best of my/our knowledge or
Buy City MI 48706	belief. If filing electronically, we further agree that the signatures
	below shall serve as the signatures that verify the accuracy and
8. Treasurer Name and Complete Address:	completeness of each statement filed electronically by the committee.
Shelby Welty	I/We certify that all reasonable diligence will be used in the
	preparation of each statement electronically filed by this committee
4148 Richmarkhu.	and that the contents of each statement will be true, accurate and
B. 1.1. M. 48711.	complete to the best of my our knowledge or belief. (Sign Name and Date)
Bay (14y Mi. 48716	and bate)
	Candidate:
E-mail Address: Swelty 710 Yahoo, Com	1/4//6/
, ,	2
9. Designated Record Keeper Name and Complete Address:	Current Treasurer:
Robert Price	
2815 N. Enelia	x4 selly 1. Welter 5/18/09
7010 10, 600 HOZAC	
Bay City MI 48706 Phone #: 989-529-0604	Designated Record Keeper (Required only if filing electronically):
Phone #: <u>989 - 529 - </u> 0607	-/20/-0
E-mail Address: prices autoservice e yahoo.com.	5/15/08
	amended / /